PTO/SB/06 (08-00)
Approved for use through 10/31/2002. OMB 0651-0032
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 6680.025 OTHER THAN CLAIMS AS FILED - PART I SMALL ENTITY OR SMALL ENTITY (Column 2) (Column 1) FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE s 355 s 0 OR (37 CFR 1.16(a)) TOTAL CLAIMS * 0 minus 20 = x \$ 18 x \$ 9 0 OR 0 (37 CFR 1.16(c)) INDEPENDENT CLAIMS minus 3 = 40 _= 40 OR 80 0 MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) 0 0 270 = 0 135 = OR 395 0 TOTAL OR TOTAL * If the difference in column 1 is less then zero, enter "0" in column 2 OTHER THAN CLAIMS AS AMENDED - PART II SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) (Column 3) **CLAIMS HIGHEST** ADDI-ADDI-REMAINING NUMBER **PRESENT** RATE TIONAL **RATE** TIONAL **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR ** 20 x \$_18 Minus n s 9 0 (37 CFR 1.16(c)) OR Independent Minus 0 40 80 O ٥ (37 CFR 1.16(b)) OR 135 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) 270 _ 0 0 OR **TOTAL** OR **TOTAL** n 0 ADDIT. FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-B REMAINING PRESENT NUMBER **RATE** TIONAL **RATE** TIONAL **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE FEE **AMENDMENT** PAID FOR OR x \$_¹⁸ Total **\$9** 0 Minus n (37 CFR 1.16(c)) OR Independent 40 80 0 Minus 0 (37 CFR 1.16(b)) OR 135 0 270 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) 0 OR TOTAL TOTAL 0 OR 0 ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS HIGHEST** ADDI-ADDI-REMAINING NUMBER PRESENT **RATE** TIONAL TIONAL RATE **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total (37 CFR 1.16(c)) x \$_9 x \$ 18 0 0 Minus OR Independent 80 40 0 0 Minus OR 135 270 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) n 0 OR TOTAL TOTAL 0 0 OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ADDIT. FEE ADDIT. FEE ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

6680.028

		CLAIMS AS	S FILED - (Column		(Column 2)			SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			4				F	RATE	FEE	OR 1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	355.00	OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			나 minus 20=				5	(\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ * minus 3 = `		*			<40=	<u> </u>		X80=	
МU	ILTIPLE DEPEN	IDENT: CLAIM P	RESENT		,					OR		
* If the difference in column 1 is less th				ro, enter	"0" in c	olumn 2	_	135=		OR	+270=	
		LAIMS AS A						OTAL	351	OR	TOTAL	THAN
		(Column 1)	MIENDEL	(Colur		(Column 3)	S	SMALL ENTITY			OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	Х	\$ 9=	*.	OR	X\$18=	
	Independent	•	Minus	***	.v.	=	\ \ \	40=	-	OR	X80=	
	FIRST PRESE	NTATION OF ME	ULTIPLE DE	IPLE DEPENDENT CLA				135=		OR	+270=	•
•							<u> </u>	TOTAL			TOTAL	
(Column 1) (Column 2) (Column 3)								IT. FEE			ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	x	\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	X	40=		OR	X80=	
L	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM			35=			+270=	
•								TOTAL		OR	TOTAL	
	(Column 1) (Column 2) (Column 3)									OR ,	ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVICE PAID	EST BER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=	, <u>Cu</u>
	Independent	*	Minus	***		=	X	40=			X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT						-	35=		OR		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
** If the "Highest Number Pr viously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												